

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | IF...S | ID NO. | DATE |
|---------------------------|--------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 48 | 7/18/01 |
| FORMALITY REVIEW | S.A | 1123 | 08/27/01 |
| RESPONSE FORMALITY REVIEW | TZ | 947 | 01/15/02 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | |
| 2 | ✓ | ✓ | |
| 3 | N | N | |
| 4 | N | N | |
| 5 | N | N | |
| 6 | N | N | |
| 7 | N | N | |
| 8 | ✓ | ✓ | |
| 9 | ✓ | ✓ | |
| 10 | ✓ | ✓ | |
| 11 | ✓ | ✓ | |
| 12 | ✓ | ✓ | |
| 13 | ✓ | ✓ | |
| 14 | N | N | |
| 15 | N | N | |
| 16 | ✓ | 0 | |
| 17 | ✓ | 0 | |
| 18 | ✓ | 0 | |
| 19 | ✓ | 0 | |
| 20 | ✓ | 0 | |
| 21 | ✓ | 0 | |
| 22 | N | N | |
| 23 | N | N | |
| 24 | N | N | |
| 25 | N | N | |
| 26 | N | N | |
| 27 | N | N | |
| 28 | N | N | |
| 29 | N | N | |
| 30 | N | N | |
| 31 | N | N | |
| 32 | N | N | |
| 33 | N | N | |
| 34 | N | N | |
| 35 | N | N | |
| 36 | N | N | |
| 37 | ✓ | ✓ | |
| 38 | N | N | |
| 39 | N | N | |
| 40 | N | N | |
| 41 | ✓ | 0 | |
| 42 | N | N | |
| 43 | ✓ | ✓ | |
| 44 | N | N | |
| 45 | ✓ | ✓ | |
| 46 | ✓ | ✓ | |
| 47 | N | N | |
| 48 | 0 | 0 | |
| 49 | 0 | 0 | |
| 50 | + | 0 | |

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 51 | ✓ | ✓ | |
| 52 | ✓ | ✓ | |
| 53 | ✓ | ✓ | |
| 54 | ✓ | ✓ | |
| 55 | N | N | |
| 56 | N | N | |
| 57 | N | N | |
| 58 | N | N | |
| 59 | N | N | |
| 60 | N | N | |
| 61 | N | N | |
| 62 | N | N | |
| 63 | + | N | |
| 64 | + | N | |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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